



STATE OF MISSOURI
BOARD FOR CERTIFICATION OF INTERPRETERS

1103 Rear Southwest Boulevard

Jefferson City, MO 65109

AFFIDAVIT FOR RENEWAL & COMPLETION OF CEUS (Continuing Education Units) (573) 526-5205 (V/TTY)

INSTRUCTIONS: Please complete the information below. Return the completed notarized form along with a \$15.00 cashier's check or money order (made payable to MCDHH/BCI Fund) -- no personal checks accepted -- to the address above. Attach copies verifying achievement of the necessary CEUs (1.2 CEUs earned from November 3 through November 2 of the current year are necessary for all interpreters certified for the full 12 months).

APPLICANT INFORMATION

APPLICANT NAME (First, Middle Initial, Last)

CIRCLE YOUR TEMPORARY CERTIFICATION LEVEL: (TRCED) (PCED)

CIRCLE YOUR MICS CERTIFICATION LEVEL:

(RCED) Novice Apprentice Intermediate Advanced Comprehensive

ADDRESS (Street, City, State, Zip Code)

TELEPHONE NUMBER

SOCIAL SECURITY NUMBER

NUMBER OF CEUs EARNED

AFFIDAVIT OF APPLICANT

I, the above-named applicant, being first duly sworn upon my oath, state the following:

That I have personally completed the foregoing application truthfully and completely, without omission;

That all the information and answers contained in the foregoing application and any attachments thereto are true and correct to the best of my knowledge and belief;

That I will comply with state laws and the rules and regulations of the Board for Certification of Interpreters; and

That I realize that I made this affidavit knowingly, and that any false statement or material omission herein subjects me to criminal penalties for making a false affidavit under Section 575.050, RSMo.

**MUST BE SIGNED IN
PRESENCE OF NOTARY**

SIGNATURE OF APPLICANT

DATE

STATE

COUNTY (or City of St. Louis)

SUBSCRIBED AND SWORN BEFORE ME, THIS
DAY OF 20

**USE RUBBER STAMP IN
CLEAR AREA BELOW**

Notary
Public
Embossed
Seal

NOTARY PUBLIC SIGNATURE

My Commission Expires:

NOTARY PUBLIC NAME (Typed or Printed)

IMPORTANT:

FAILURE TO COMPLETE ANY PORTION OF THIS FORM WILL RESULT IN AN INVALID CERTIFICATION

ENVELOPE CONTAINING AFFIDAVIT MUST BE POSTMARKED ON OR BEFORE DECEMBER 2, 2005 OR YOUR CERTIFICATION WILL BECOME INVALID AND A LATE FEE OF \$30.00 WILL APPLY.

A REINSTATEMENT FEE OF \$50.00 WILL ALSO APPLY IF CEUS ARE NOT EARNED BY NOVEMBER 2, 2005.